IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

							RESPONSE UNDE		
In so Detent Application of			Λ+1.	D IC 117 210		EXPED	TED HANDLING PR	OCE	URE
In re Patent Application of			Atty Dkt.		BJS-117-319		achments:		
				C#	M#		Amendment Under	Rule 3	312;
HERMON-TAYLOR et al		TC/A.U	J.	1645		(2)	and Replacement Sheet	/Eigu	ro 1)
Serial No. 09/646,568		Ex	aminer:	Minnifield		(2)	Replacement Sneet	(Figu	ie i)
Filed:	ed: November 9, 2000		Date:	February 13, 2012		2			
Title:	DIAGNOSTICS AND VACO ANIMALS AND HUMANS	CINES FOR MYCOE	BACTER	IAL INFE	CTIONS OF	=			
Commi P.O. Bo	Stop Issue Fee ssioner for Patents ox 1450 dria, VA 22313-1450								
Sir:									
incorpo	a response/amendment/le rated by reference and th re thereon.	etter in the above-	identifie	d applic		ncludes an			
□ c	orrespondence Add	ress Indicatio	n Forn	n Atta	ched.				
Total e	re attached as calculate effective claims after amer usly paid for 20			highest x \$60.0	number	\$0.00	(1202)/\$0.00 (2202)	\$	0.00
	endent claims after amendusly paid for 3 (lment 0 at least 3) =		highest x \$250.	number 00	\$0.00	(1201)/\$0.00 (2201)	\$	0.00
If prop	er multiple dependent cla	ims now added fo	r first tin	ne, (igno	ore imprope				
Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) One Month Extension \$150.00 (1251)(\$0.00 (2251) Two Month Extensions \$550.00 (1251)(\$0.00 (2251) Two Month Extensions \$550.00 (1252)(\$0.00 (2252) Three Month Extensions \$1270.00 (1253)(\$0.00 (2253) Four Month Extensions \$1980.00 (1253)(\$0.00 (2254) Five Month Extensions \$1980.00 (1253)(\$0.00 (2254) Five Month Extensions \$200.00 (1255)(\$0.00 (2254) Five Month Extension \$200.00 (1255)(\$0.00 (2254) Five Month Extension \$200.00 (1255)(\$0.00 (2254) Five Month Extension \$200.00 (1255)(\$0.									0.00
Tormi	nal disclaimer enclosed, a	aa	FIV	e Mont	n Extensio		1814)/ \$0.00 (2255)		0.00
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Rule 56 Information Disclosure Statement Filing Fee							\$180.00 (1806)	\$	0.00
Assignment Recording Fee						\$40.00 (8021)	\$	0.00	
Other:								\$	0.00
							TOTAL FEE	\$	0.00
⊔ c	REDIT CARD PAY	MENT (FORM	I ATT	ACHE	D IF PA	PER FILI	NG).		
asserte	mmissioner is hereby aut d to be filed, or which sho our Account No. 14-1140	uld have been file							/ this

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000

Facsimile: (703) 816-4100 BJS:pp

Signature: /B. J. Sadoff/

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